

## APPLICATION FOR BAPTISM

Please download and fill in all relevant sections of this form. You can then save the form and e-mail it to: Parish Secretary, [admin@southernvalesparish.org](mailto:admin@southernvalesparish.org) Or, you can print the form, fill in by hand and post to: WFA c/o 54 Tiller Drive Seaford SA 5169

Are you or a child coming to be baptised? You  \*Go to Baptismal personal details below Child

### Child Baptismal Details

Proposed date of Baptism \_\_\_\_\_ Date of birth \_\_\_\_\_

Child's Christian Names \_\_\_\_\_ Surname \_\_\_\_\_

**Father** Baptised  Confirmed

First Names \_\_\_\_\_ Surname \_\_\_\_\_

**Mother** Baptised  Confirmed

First Names \_\_\_\_\_ Surname \_\_\_\_\_

Father's Occupation \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Street Address \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

**Guardians/Sponsors Full Names** Baptised Confirmed

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

### \*Baptismal personal details

First Names \_\_\_\_\_ Surname \_\_\_\_\_

Street Address \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Have you spoken to a Priest about the baptism and the location? (If so fill in details below. If not, we will contact you soon.)

Name of Priest \_\_\_\_\_ Place of Baptism \_\_\_\_\_

**Please return this form at least two weeks before the baptism date to enable the preparation of the certificate**

\*Permission given for photos to be taken for publication in our online newsletter and website .